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PATENT
ATTORNEY DOCKET NO.: 047714-5004-US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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MAR 06 2001

TECH CENTER 1600/2900

In re Application of:

David PASCUAL *et al.*

Serial No.: 09/068,935

Filed: November 23, 1998

For: THERAPEUTIC AND DIAGNOSTIC
AGENTS FOR THE TREATMENT OF
MICROBIAL INFECTIONS



Group Art Unit: 1644

Examiner: Phillip Gambel, Ph.D.

Commissioner for Patents
Washington, D.C. 20231

RESPONSE TO RESTRICTION REQUIREMENT
TRANSMITTAL FORM

Sir:

1. Transmitted herewith is a Response to Restriction Requirement responding to the Office Action mailed August 29, 2000. Filed concurrently is a Petition for 5 months extension of time whereby response is due February 28, 2001.
2. Additional papers enclosed.

- ☐ Information Disclosure Statement
- ☐ Form PTO-1449, ___ references included
- ☐ Citations
- ☐ Declaration of Biological Deposit
- ☐ Submission of "Sequence Listing", computer readable copy and/or amendment pertaining thereto for biotechnology invention containing nucleotide and/or amino acid sequence.

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945.00 DP

3. EXTENSION OF TIME

The proceedings herein are for a patent application and the provisions of 37 CFR 1.136(a) apply.

☐ Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

☒ Applicant petitions for an extension of time, the fees for which are set out in 37 CFR 1.17(a)-(d), for the total number of months checked below:

<u>Total months requested</u>	<u>Fee for extension</u>	<u>[fee for Small Entity]</u>
<input type="checkbox"/> one month	\$ 110.00	\$ 55.00
<input type="checkbox"/> two months	\$ 390.00	\$195.00
<input type="checkbox"/> three months	\$ 890.00	\$445.00
<input type="checkbox"/> four months	\$1,390.00	\$695.00
<input checked="" type="checkbox"/> five months	\$1,890.00	\$945.00

Extension of time fee due with this request: \$945.00

If an additional extension of time is required, please consider this a Petition therefor.

☐ An extension for __ months has already been secured and the fee paid therefor of \$____ is deducted from the total fee due for the total months of extension now requested.

3. Fee Calculation

CLAIMS AS AMENDED						
	Claims Remaining After Amendment		Highest No. Previously Paid	Present Extra	at Rate of	Total Fees
Total Claims	54	minus	54	0	<u>0</u> x \$18 each=	+ \$0
Independent Claims	14	minus	14	0	<u>0</u> x \$80 each=	+ \$0
[] First presentation of Multiple dependent claim(s)				0	\$260.00	+ \$0
SUB-TOTAL =						\$ 0
Reduction by 1/2 for filing by a small entity						- \$ 0
TOTAL FEE =						\$ 0

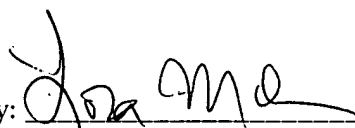
4. Fee Payment

[] No fee is to be paid at this time.

[X] Check No. 109650 in the amount of \$945.00 for five months extension of time is enclosed. The Commissioner is hereby authorized to charge any additional extension of time fee or additional fee for claims due to Deposit Account No. 50-0310.

[X] The Commissioner is hereby authorized to charge any additional fees which may be required, including fees due under 37 CFR §§ 1.16 and 1.17, or credit any overpayment to Deposit Account 50-0310.

Respectfully submitted,

By: 
 Lora M. Green
 Reg. No. 43,541

Dated: February 28, 2001

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Customer No. 009629

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